

Please fill out and mail to: Twin Lakes State Park

Route 2, Box 70

Green Bay, Virginia 23942

(804) 767-2398

Please Allow For Up to Thirty (30) Days for Processing

<u>Please type or print</u>

Represented by  City		Title	
		State	Zip Code
/	Time:	/	
Year		Beginning	Ending
	City  Year	City  — Year	City State  Area of Pa

Any exhibits or displays			
Number & type?	<u></u>		
Any special requirements? (s	how type, location for cost and se		
Electricity?			
Water?			
Signs?			
Public Address System?			
Porta-Johns?			
Picnic Tables?			
Tieme Tables:			
Any special personnel? (show	v type, location, n	number and responsibility	
	for obtaining a	and cost.)	
Law Enforcement?			
Rescue Squad (First Aid)?			
Fire Department?			
•			
Guest(s) of Honor?			
	Who	How	Identified
Entertainment?			
	Who	When	Location
Items to be sold?			
	Type		By Whom
Sales Tax Arrangements			•
E	Type	By Whom	Prizes
Judging of items?	71	ž	
<i>c c</i> ———	Type	By Whom	Prizes
Health Dept. requirements (	for food handlers	3)?	
ricarar Bepti requirements (	ioi iood nandioi	Type	By Whom
Control Point?		~ <del>-</del>	Dy Whom
control rome.			
Traffic Flow Control?			
Traine Flow Control.	Type —	Location	By Whom
Potential Safety Hazards?	Турс	Location	by whom
1 Otential Balety Hazards:	Type —	Location —	By Whom
Registration or Attendance l			by whom
Registration of Attendance i	rees (Chele Ohe	Amount	By Whom
Livestock or animals (Circle	One)?	Amount	by whom
Livesiock of allillais (Clicit	Type	Number	Location
Clean Up?	1 ype	Nullioei	Location
	/hen	D.	Whom
V	11011	Бу	Whom

Please summarize below the planned event ar	nd all involved activities:	
Signed:	Date:	
Park Manager's Comments:		
Park Manager's Signature: Date:		